

**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective October 1, 2003

Application or Docket Number

*DEA 9902 DV*

**CLAIMS AS FILED - PART I**

|   | (Column 1)           | (Column 2)   |
|---|----------------------|--------------|
| TOTAL CLAIMS  | <i>22</i>            |              |
| FOR   | NUMBER FILED         | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS                                   | <i>22</i> minus 20 = | * <i>2</i>   |
| INDEPENDENT CLAIMS  | <i>2</i> minus 3 =   | * <i>✓</i>   |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> |                      |              |

\* If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

*11/6/06*

|   | (Column 1)                       | (Column 2)                         | (Column 3)    |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT A   | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total   | * <i>29</i>                      | Minus <i>22</i>                    | = <i>7</i>    |
| Independent   | * <i>2</i>                       | Minus <i>2</i>                     | =             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |                                    |               |

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

| RATE      | FEE        |
|-----------|------------|
| BASIC FEE | 385.00     |
| X\$ 9=    | <i>18</i>  |
| X43=      |            |
| +145=     |            |
| TOTAL     | <i>403</i> |

| RATE      | FEE    |
|-----------|--------|
| BASIC FEE | 770.00 |
| X\$18=    |        |
| X86=      |        |
| +290=     |        |
| TOTAL     |        |

SMALL ENTITY

OR OTHER THAN SMALL ENTITY

| RATE           | ADDITIONAL FEE |
|----------------|----------------|
| <i>25.00</i>   |                |
| X\$ 9=         | <i>200.00</i>  |
| <i>100.00</i>  |                |
| X43=           |                |
| +145=          |                |
| TOTAL          |                |
| ADDITIONAL FEE |                |

| RATE           | ADDITIONAL FEE |
|----------------|----------------|
| <i>50.00</i>   |                |
| X\$18=         |                |
| <i>200.00</i>  |                |
| X86=           |                |
| +290=          |                |
| TOTAL          |                |
| ADDITIONAL FEE |                |

|   | (Column 1)                       | (Column 2)                         | (Column 3)    |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT B   | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total   | *                                | Minus                              | ** =          |
| Independent   | *                                | Minus                              | *** =         |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |                                    |               |

| RATE           | ADDITIONAL FEE |
|----------------|----------------|
| X\$ 9=         |                |
| X43=           |                |
| +145=          |                |
| TOTAL          |                |
| ADDITIONAL FEE |                |

| RATE           | ADDITIONAL FEE |
|----------------|----------------|
| X\$18=         |                |
| X86=           |                |
| +290=          |                |
| TOTAL          |                |
| ADDITIONAL FEE |                |

|   | (Column 1)                       | (Column 2)                         | (Column 3)    |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT C   | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total   | *                                | Minus                              | ** =          |
| Independent   | *                                | Minus                              | *** =         |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |                                    |               |

| RATE           | ADDITIONAL FEE |
|----------------|----------------|
| X\$ 9=         |                |
| X43=           |                |
| +145=          |                |
| TOTAL          |                |
| ADDITIONAL FEE |                |

| RATE           | ADDITIONAL FEE |
|----------------|----------------|
| X\$18=         |                |
| X86=           |                |
| +290=          |                |
| TOTAL          |                |
| ADDITIONAL FEE |                |

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
  - \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
  - \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.